

Building Utilization Request



Pioneer Career and Technology Center

ATTN: Director of Business Affairs
27 Ryan Road, Shelby, OH 44875

Part I - To be completed by organization requesting building utilization

Date(s) <u>5/1/2024</u>		Setup Time	Tear Down	Date Request Submitted
Activity: Day(s) <u>Wednesday</u>				<u>January 17, 2024</u>
Event Time(s) <u>9:00 am to 1:00 pm</u>		<u>8:00 AM</u>	<u>2:00 PM</u>	Room(s) / Area Requested:
Name of Organization and Event Being Held Engineering Instructor's - Vex Robotic Competition		Number of Persons Attending Meeting <u>60 people</u>		Arena
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: <u>Matt Parr</u>		Business Name: <u>Pioneer Engineering Instructors</u>		
Phone Numbers: Home: _____		Contact Person: <u>Matt Parr</u>		
Work: <u>42206</u> Cell: <u>419 566-6071</u>		Phone Number: <u>419-566-6071</u>		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
<input type="checkbox"/> Café OR <input type="checkbox"/> Culinary Arts <u>60</u> Chairs <u> </u> Microphone <u> </u> Drinks <u>2</u> Tables <u> </u> Ovrhd. Proj. <u> </u> Snacks <u> </u> Chalkboard <u> </u> Video Camera <u> </u> Breakfast <u> </u> Lectern <u> </u> Video Recorder <u> </u> Luncheon <u>X</u> Coat Racks <u> </u> Internet Access <u> </u> Dinner		If specific hookup/utility needs are required see attached: (check <u> </u> Yes or <u> </u> No) Estimated time of arrival at Pioneer for setup/delivery: _____ Other/Specify: _____ _____ _____ _____		
For specific room setup, see attached design: (check one) <u> </u> Yes or <u>X</u> No		Date of contact with Cafeteria/Culinary Arts Services if used for this event: <u>N/A</u>		

Part II - To be completed by PCTC Personnel

Estimate Calculation of Fees: Attach any pertinent papers	
Rental.....	<u>\$0.00</u>
Custodial Services	<u>0.00</u>
Food Services	<u>0.00</u>
Other	
Total Fee Estimate	<u>\$0.00</u>
Note: Final invoice billing based upon actual costs following the event/activity.	
Upon receipt of invoice, please make check payable to: Pioneer CTC	
Action Taken	Date By
<u>OK</u>	<u>1/22/24</u> <u>ML</u>

Responsibility Notice

It is understood that our organization assumes full responsibility for any damage to the building and equipment.

A Security Deposit in the amount of \$ _____ is required to confirm scheduling. This will be applied to final invoice upon satisfactory complete of event/activity.

Any and all information on this form may be shared with the public through our publicly accessed calendar.

Matthew R Parr
Signature (person in charge of activity)

Date: 1-17-24

It is the policy of Pioneer Career & Technology Center to use these funds for the direct use, improvement, and maintenance of the building utilization areas of the

Thank you for selecting Pioneer for your event!